RECORDS TRANSMITTAL AND RECEIPT (Continuation)				This form is to continue listing of Records Data when space on SF 135 is not adequate. Instructions for completion of SF 135 apply.		TRANSFERRING AGENCY'S NAME		DATE				
			VOLUME (cu. ft.)	AGENCY SERIE BOX DESCRIP NUMBERS (With inclusive data		ON Sof records)	DISPOSAL AUTHORITY (Schedule and item number)	DISPOSAL DATE	COMPLETED BY RECORDS CENTER  BY HELE  LOCATION  HELE  HE			
RG (a)	FY (b)	NUMBER	(cu. n.)	NUMBERS (e)	SERIES DESCRIPT (With inclusive date: (f)	s of records)	item number) (h)	(i)	LOCATION (j)	SHE!	(I)	AUT(e)